## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number 10665098

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
-	T41 01 41140		(Column 1)		(Column 2)		1	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			19					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	19 minus 20=		* \$			X\$ 9=		OR	X\$18=	
<u> </u>	EPENDENT CL		4 minus 3 =		* /			X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enti					"0" in c	olumn 2		TOTAL		OR	TOTAL	834
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
_		(Column 1)		(Column 2)			)_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	-	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- CI AINA	<u> -</u>	4	X42=		OR	X84=	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT: FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		ADDII. FEE		•	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	10	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OB	X84=	
-	FIRST PRESE	NIATION OF M	ULTIPLE DEI	LTIPLE DEPENDENT			L	+140=		OR	+280=	
ADI								TOTAL			TOTAL	<u> </u>
								ADDIT. FEE		OR	ADDIT. FEE	L
╟	Cast did Salding	(Column 1)	1.35 Beauty	(Colur		(Column 3)	ነ .					
AMENDMENT C	1,2846	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		<u> -</u>	4	X42=		OR	X84=	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140			.000	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE											ADDIT. FEE	L
	The "Highest Nur	nber Previously Pa	id For" (Total o	r Independ	ent) is the	highest numb	er fo	und in the app	oropriate bo	x in col	lumn 1.	